WISCONSIN VETERANS HOME N2665 COUNTY ROAD QQ

KING	54946	Phone: (715) 258-55	86	Ownership:	State
Operated from	1/1 To 12/31	. Days of Operation	n: 365	Highest Level License:	Skilled
Operate in Con	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/03):	721	Title 18 (Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/03):	721	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on 12/31	./03:	714	Average Daily Census:	701

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	용	
Home Health Care	No	Primary Diagnosis	용	Age Groups	용	Less Than 1 Year	16.2	
Supp. Home Care-Personal Care	No					1 - 4 Years	35.3	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	11.2	More Than 4 Years	43.1	
Day Services	No	Mental Illness (Org./Psy)	29.6	65 - 74	18.6			
Respite Care	No	Mental Illness (Other)	10.4	75 - 84	48.0		94.7	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.6	85 - 94	20.7	*********	*****	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	1.4	Full-Time Equivalent		
Congregate Meals No		Cancer		3		- Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	21.0	65 & Over	88.8			
Transportation	No	Cerebrovascular	6.6			RNs	6.8	
Referral Service	No	Diabetes	0.0	Gender	8	LPNs	6.5	
Other Services	No	Respiratory	6.9			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	23.8	Male	81.1	Aides, & Orderlies	36.8	
Mentally Ill	No			Female	18.9	1		
Provide Day Programming for			100.0			I		
Developmentally Disabled	No				100.0	I		

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		:	Private Pay			amily Care			anaged Care			
Level of Care	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	00	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	1	0.7	224	0	0.0	0	0	0.0	0	1	0.1
Skilled Care	0	0.0	0	398	70.7	145	0	0.0	0	86	57.0	189	0	0.0	0	0	0.0	0	484	67.8
Intermediate				150	26.6	122	0	0.0	0	54	35.8	155	0	0.0	0	0	0.0	0	204	28.6
Limited Care				15	2.7	107	0	0.0	0	7	4.6	131	0	0.0	0	0	0.0	0	22	3.1
Personal Care				0	0.0	0	0	0.0	0	3	2.0	102	0	0.0	0	0	0.0	0	3	0.4
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		563	100.0		0	0.0		151	100.0		0	0.0		0	0.0		714	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03		
Deaths During Reporting Period	% Needing								
Percent Admissions from:		 Activities of	%			% Totally	Total Number of		
Private Home/No Home Health	45.5	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents		
Private Home/With Home Health	0.0	Bathing	11.3		72.8	15.8	714		
Other Nursing Homes	29.1	Dressing	45.2		46.1	8.7	714		
Acute Care Hospitals	11.1	Transferring	65.1		25.9	9.0	714		
Psych. HospMR/DD Facilities			57.8		31.7	10.5	714		
Rehabilitation Hospitals	0.0	Eating	63.9		31.8	4.3	714		
Other Locations	14.3	*********	*****	*****	*****	*****	*****		
	189			용	Special Treatmen	ts	용		
ercent Discharges To:		Indwelling Or Extern	al Catheter	6.9	Receiving Resp	iratory Care	12.7		
Private Home/No Home Health	7.8	Occ/Freq. Incontinen	t of Bladder	28.4	Receiving Trac	· · · · · · · · · · · · · · · · · · ·	0.1		
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	it of Bowel	15.5	Receiving Suct	ioning	0.1		
Other Nursing Homes	3.1				Receiving Osto	my Care	1.1		
Acute Care Hospitals	0.0	Mobility			Receiving Tube	Feeding	0.4		
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	3.9	Receiving Mech	anically Altered Diets	33.6		
Rehabilitation Hospitals	0.0	 			_	<u>-</u>			
Other Locations	1.6	Skin Care			Other Resident C	haracteristics			
Deaths	87.5	With Pressure Sores		1.8	Have Advance D	irectives	84.2		
otal Number of Discharges		With Rashes		14.3	Medications				
(Including Deaths)	192				Receiving Psyc	hoactive Drugs	60.2		

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Ownership: Government		Bed Size:		Lic	ensure:			
	This			2	00+	Ski	lled	Al	1	
	Facility	Peer	Peer Group % Ratio		Peer Group		Peer Group		lities	
	%	용			Ratio	용	Ratio	용	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	97.2	88.1	1.10	92.9	1.05	88.1	1.10	87.4	1.11	
Current Residents from In-County	7.8	55.3	0.14	31.2	0.25	69.7	0.11	76.7	0.10	
Admissions from In-County, Still Residing	4.8	26.8	0.18	14.5	0.33	21.4	0.22	19.6	0.24	
Admissions/Average Daily Census	27.0	57.4	0.47	40.9	0.66	109.6	0.25	141.3	0.19	
Discharges/Average Daily Census	27.4	59.7	0.46	44.5	0.61	111.3	0.25	142.5	0.19	
Discharges To Private Residence/Average Daily Census	2.1	17.8	0.12	11.5	0.19	42.9	0.05	61.6	0.03	
Residents Receiving Skilled Care	67.9	85.9	0.79	78.1	0.87	92.4	0.73	88.1	0.77	
Residents Aged 65 and Older	88.8	88.5	1.00	89.8	0.99	93.1	0.95	87.8	1.01	
Title 19 (Medicaid) Funded Residents	78.9	76.4	1.03	78.6	1.00	68.8	1.15	65.9	1.20	
Private Pay Funded Residents	21.1	18.1	1.17	19.2	1.10	20.5	1.03	21.0	1.01	
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00	
Mentally Ill Residents	39.9	47.1	0.85	37.9	1.05	38.2	1.05	33.6	1.19	
General Medical Service Residents	23.8	21.1	1.13	25.3	0.94	21.9	1.09	20.6	1.16	
Impaired ADL (Mean)	30.5	44.7	0.68	39.0	0.78	48.0	0.64	49.4	0.62	
Psychological Problems	60.2	62.8	0.96	56.9	1.06	54.9	1.10	57.4	1.05	
Nursing Care Required (Mean)	8.0	7.8	1.03	7.9	1.02	7.3	1.10	7.3	1.10	